6	IPE '						· · · · · · · · · · · · · · · · · · ·			
	TITION FO	OR EXTENSION (₹ 1.136(a)	Docket No. ENDOV-67986						
Re Application Of: Robert A. Van Tassel, et al.										
Appl	lication No.	Filing Date	Customer No.	Group Art Unit	Confirmation No.					
10	0/798,786	3/10/2004	24201	3739	5624					
Invention: METHOD FOR TREATMENT OF ANEURYSMS										
COMMISSIONER FOR PATENTS: This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response to the Office Action of 3/6/2006 in the above-identified application.										
The r	•	tension is as follows (<u></u> .					
l	☐ One mon		nonths 🗵	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Five months			
	from:	6/6/2006 Date		until:		5/2006 Date				
 The fee for the extension of time is \$1,020 and is to be paid as follows: ☑ A check in the amount of the fee is enclosed. ☑ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 06-2425 ☑ If an additional extension of time is required, please consider this a petition therefor and charge 										
	any addition	nal fees which may be	e required to D	eposit Account						
 Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. 										
FULV	V. Hanley WIDER PATT			_	Dated: Septe					
6060 C Los A (310)	ard Hughes Co Center Drive, Angeles, CA 9 824-5555 Offi 824-9696 Fac	, Tenth Floor 00045 fice esimile		I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on September 6, 2006 (Date)						
		09/12/2006 HHGUYEH1	- In	Signature of Person Mailing Correspondence						
		01 FC:1253	Si gnatur	re of Person Mading C John V. Hanle						
CC:										

Typed or Printed Name of Person Mailing Correspondence

Doc Code:

SEP 11 / Ullh
Approved for use through 07/31/2006. OMB 0651-0032
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A THAN HE WILL				Complete if Known					
Fees pursuant to the Consolidated Appropriatons Act, 2005 (H.R. 4818).				Application Nu	mber	10/798,786			
FEE TRANSMITTAL				Filing Date		3/10/2004			
for FY 2006				First Named In	ventor	Robert A. Van Tassel			
	Examiner Nam	е	Roy Dean Gibson						
Applicant claims small en	Art Unit		3739						
TOTAL AMOUNT OF PA	Attorney Docke	et No.	ENDO	V-67986					
METHOD OF PAYMENT	(check al	that apply)		-					
Check Credit Card Money Order None Other (please identify):									
Deposit Account Depos	it Account	Number:	06-2425	Deposi	t Accoun	t Name:	Fulwie	der Patton LLP	
For the above-identified de	posit accou	nt, the Director	is hereby au	thorized to: (check	all that a	pply)			
Charge fee	e(s) indicate	d below		Cha	rge fee(s)	indicated	below, except f	or the filing fee	
— Charge an	v additional	fee(s) or any un	iderpayment	ts of 🔲 Cred	dit any ove	rpavment	s		
fee(s) unde	er 37 CFR 1	.16 and 1.17		_	•	• •		form Provide credit	
WARNING: Information on the card information and authoriz	is form ma ation on Pi	o become pub O-2038.	nic. Credit	card information	snould r	iot be iiii	ciadea on tills	S JOHN. Provide Cledit	
FEE CALCULATION (AI	the fee	s below are	due upo	n filing or ma	ay be s	ubject t	o a surcha	rge.)	
1. BASIC FILING, SEARCH	, AND EX	AMINATION F							
	FILING F		SEAR	CH FEES Small Entity		XAMINA	TION FEES Small Entity		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)			ee (\$)	Fee (\$)	Fees Paid(\$)	
Utility	300	150	500	250		200	100		
Design	200	100	100	50		130	65		
Plant	200	100	300	150		160	80		
Reissue	300	150	500	250		600	300		
Provisional	200	100	0	0		0	0		
2. EXCESS CLAIM FEES Small Entity									
Fee Description Fee (\$) Each claim over 20 (including Reissues) 50							25		
Each independent claim over	-	•					200	100	
Multiple dependent claims							360	180	
								Dependent Claims	
	Extra Clain			Fee Paid (\$)			<u>Fee (\$)</u>	Fee Paid (\$)	
23 - 20 or HP = HP = highest number of total cla	ims naid for	X if greater than	\$18.00 :	=\$0.00_	-				
	Extra Clain			Fee Paid (\$)					
3 - 3 or HP =			200.00	= \$0.00	-				
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listing under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets									
-100 = 0 /50 0 (round up to a whole number) x \$250.00 = \$0.00 4 OTHER FEE(S)									
4. OTHER FEE(S) Non-English specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): Petition for a Three Month Extension of Time \$1,020.00									
SUBMITTED BY									
Signature		H /		Registration No.	38,	171	Telephone	310-824-5555	

4	SUBMITTED BY							
ſ	Signature	Dr. v.	64		Registration No. (Attorney/Agent)	38,171	Telephone	310-824-5555
1	Name (Print/Type)	John V			ley		Date	9/6/2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.